

OFFICE OF THE ILLINOIS STATE FIRE MARSHAL
Division of Petroleum and Chemical Safety
1035 Stevenson Drive
Springfield, Illinois 62703-4259
(217/785-5878 or 217/785-1020)

FOR OFFICE USE ONLY

Facility # _____
Date Rec'd 6-16-92
Date Returned 7-10-92

Arrow Gear Co
Name _____
2301 Cantiss St
Street Address _____
Downers Grove IL 60515
City State Zip _____
Contact Person _____

IF YOU HAVE ANY QUESTIONS CALL:
Eric Reiser - After 3:00 p.m.
217/785-1020 or 217/785-5878

RECEIVED

JUL 17 1992

ARROW GEAR CO

Gentlemen:

A review of your application has revealed that information supplied was insufficient or not required for approval. Please provide or note all the items checked below:

1. ☒ Your application is being returned. *request for extension*

☐ We have received and deposited your \$100 check # _____ and it has been credited to your account. It will be applied to your plan review fee when you resubmit your application with the requested additional information.

2. ☐ The annual tank or late registration fees for this facility have not been paid as required by state and federal law. All applicable fees must be paid before a permit will be granted. Please issue another check in the amount of \$ _____ for the annual tank or late registration fees and return along with your application.

3. ☐ The tanks are not registered with our office as required by state and federal law. Tanks must be registered and applicable fees paid before a permit will be granted. Enclosed is a notification for underground storage tanks. Please complete and return with a check in the amount of \$ _____ for late fees (\$500 per tank) or annual fees (\$100 per tank). Also return your application. If you believe the tanks are exempt from registration, a letter of explanation signed by the tank owner must accompany your application and permit fee.

4. ☐ Wrong application completed. Please submit enclosed application(s).

5. ☐ An original and three (3) copies of applications are required. Original application must have an original signature and date signed.

6. ☐ Statement of Need is required.

7. ☐ Four (4) copies of site plans are required. Site plans must show property lines, buildings, location of tanks, location of pumps, piping, monitor wells, wells, sewers and all inlets to them. Dimensions should be specified on plans.

8. ☐ Item _____ of No. _____ on the permit application has been omitted and must be answered.

9. ☐ Contractor not registered as required by law. A registered contractor must be listed before a permit will be granted.

10. ☐ A registered contractor must be listed before a permit will be granted.

11. ☐ Application has not been signed.

12. ☐ Check has not been signed.

13. ☐ No application fee was received (\$100 per facility).

(continued on reverse side)

14. We received and deposited your Check No. _____ in the amount of \$ _____.

No fees are due for:

_____ aboveground dispensing;

_____ heating oil tanks 1100 gallons and under;

_____ tanks last used prior to Jan. 1, 1974; or

_____ tanks properly filled with inert materials prior to 10/15/85.

To obtain a refund send a letter requesting a refund along with a copy of your cancelled check (both sides) and your Federal ID # or Social Security number to our office.

15. Application is illegible and/or not properly filled out. (see other)

16. ☒ Please return this form with your resubmission.

17. ☒ Other: This permit has already been extended once.
A new permit must be applied for along with
another permit fee.

Your cooperation in this matter is greatly appreciated. No work is to commence without a granted permit in hand and must be available upon request of inspectors.

Enclosure

cc:

#603

**ARROW
GEAR
COMPANY**

2301 Curtiss Street Downers Grove, Illinois 60515 708-969-7640 Fax: 708-969-0253

June 8, 1992

W. Dale Tanke
 Storage Tank Safety Engineer
 Office of the Illinois State Fire Marshal
 Division of Petroleum and Chemical Safety
 1035 Stevenson Drive
 Springfield, IL 62703-4259

RECEIVED
 JUN 16 1992
 DIV. OF PETROLEUM &
 CHEMICAL SAFETY

Subject: Removal of Underground Storage Tank,
 Permit Number 345-91 ABN

Dear Mr. Tanke:

Arrow Gear Company recently successfully filled one underground storage tank and replaced it with above ground tanks to comply with all federal and state underground storage tank regulations.

We currently have a second underground storage tank in our heat treat department which is scheduled for closure. However, with the current backlog in our heat treat department, we can not afford any extended length shut down for this department. We feel that the tank is in good sound condition since it contains non-corrosive, non-hazardous quench oil only.

Therefore, we are asking your office to grant us a six month extension on our permit for closure of the remaining underground storage tank until a more opportune time to shut down our heat treat department arises and further arrangements can be made. If we close now, we may have to put people on extended lay-off in the heat treat and other departments, which, in these tough economic times, is a difficult choice.

We are committed to the closure of our underground storage tanks and will comply with these regulations.

Sincerely,
 ARROW GEAR COMPANY

E.D. Kauzlarich
 V.P. of Facilities

Richard H. Shapiro
 Metallurgist/
 Environmental Manager

cc: J.J. Cervinka

OFFICE OF THE ILLINOIS STATE FIRE MARSHAL
Division of Petroleum and Chemical Safety
1035 Stevenson Drive
Springfield, Illinois 62703-4259

FOR OFFICE USE ONLY

Facility # _____
Permit # _____

Application for Permit to ABANDON IN PLACE
Underground Storage Tanks for Petroleum and Hazardous Substances

This form is to be completed in triplicate and submitted together with three copies each of site plans and statement of need with the Division of Petroleum and Chemical Safety 1035 Stevenson Drive, Springfield, Illinois 62703-4259 (217/785-5878) or (217/785-1020)

1) (Owner of tanks) - Corporation, partnership or other business entity: (Must Be Mailing Address)

Name _____
Street Address _____
City _____ State _____ Zip _____
Contact Person _____ Phone _____

2) (Facility) - name and address where tanks are located:

Name _____
Street Address _____
City _____ State _____ Zip _____ County _____
Contact Person _____ Phone _____
Facility Registration I.D. Number _____

3) (Contractor) - person, firm or company performing work:

Name _____
Street Address _____
City _____ State _____ Zip _____ County _____
Phone _____ Registration No. _____

4) Abandonment of Tanks:

a) Number and size of tanks being abandoned: _____

b) Reason for abandonment of tanks: _____

5) What products were stored in each tank? _____

a) Date each tank was last used? _____

6) Are four site plans showing distances to building, etc. and four statements of need included with this application? _____

7) Insufficient information supplied for permit review or omission of permit fee is grounds for application rejection. No work is to commence without a granted permit in hand and must be available upon request of inspectors. All work must be done by contractors registered with the State Fire Marshal's Office or by the tank owner only.

8) A permit fee of \$100 for each facility must accompany this application. (Checks or money orders are to be made payable to Office of the State Fire Marshal, do not send cash.) ☐ Check ☐ Money Order

9) For each facility, EPA form 7530-1 - Notification of Underground Storage Tanks must be completed and submitted to the Office of the State Fire Marshal after tanks are removed.

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that all submitted information is true, accurate and complete.

Name of Authorized Representative: _____ Title and Company represented: _____

Signature of Authorized Representative: _____ Date: _____

The Office of the State Fire Marshal is requesting information that is necessary to accomplish the statutory purpose as outlined in Illinois Revised Statutes, Chapter 127, Paragraph 9. Disclosure of this information is REQUIRED. Failure to provide any information will result in this form not being processed. This form has been approved by Forms Management Center.

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Street Address

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Contact Person Phone

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Office of the State Fire Marshal
State of Illinois

STATEMENT OF NEED

Facility name: _____

Facility location: _____

Number of tanks involved: _____ Size of tanks: _____

What product is stored in tanks: _____

Name of owner: _____

Address: _____
City State Zip

Description of specific tank(s) location: _____

Explanation of why waiver is requested: _____

Attach other supporting information if available. _____

CERTIFICATION

I certify to this Office, that each subject underground storage tank system is not currently leaking; nor has leaked in the past. The owner/operator has measured for the presence of a release where contamination is most likely to be present at each UST site in accordance with 41 Ill. Adm. Code 170.640 (a)(b). Each sample analysis has met State established clean-up objectives. 170.670(3)(c)(3)

Name of owner's authorized representative

Date

Signature

Position

Company



Office of the State Fire Marshal
State of Illinois

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